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APPLICANTS

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** CONTINUING DATA ***** N/A

** FOREIGN APPLICATIONS ***** N/A

IF REQUIRED, FOREIGN FILING LICENSE
 GRANTED ** 06/15/2000

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after ECT Allowance
Verifier and Acknowledged	Examiner's Signature Initials

ADDRESS

20985

TITLE

Network session management

FILING FEE RECEIVED 970	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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